



NCOA

Non Commissioned Officers Association of the United States of America

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STATEMENT FOR THE RECORD

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NON COMMISSIONED OFFICERS ASSOCIATION
OF THE UNITED STATES OF AMERICA**

**SUBCOMMITTEE ON HEALTH,
COMMITTEE ON VETERANS AFFAIRS
U.S. HOUSE OF REPRESENTATIVES**

OVERSIGHT HEARING

ON

**The Status of Homeless Assistance Programs for Veterans conducted by the
Department of Veterans Affairs
Including the Department's Coordination
With Community Based Providers and other Agencies**

May 6th, 2003

Recognition

Mr. Chairman and distinguished Members of the Subcommittee on Health:

The Non Commissioned Officers Association of the USA (NCOA) is most grateful that in the immediate aftermath of the United States declaration of victory in the Iraq War that significant numbers of America's land; sea and air military forces are enroute home. We note also that a significant number of military personnel will remain in Iraq for whatever time is necessary for that Nation's citizens to establish a lawful government and ensure its development at which time these peacekeeper forces likewise will return home.

America has reacted most appropriately since the September 11th Terrorist Attack on America demonstrating its resolve in major deployments and military intervention in the Global War against Terrorism.

It is appropriate for NCOA to recognize the Committee on Veterans Affairs, Subcommittee on Health, for its efforts to ensure the well-being of the active military, Guard and Reserve personnel but equally as important the legislative care of homeless veterans. In 1991, during the immediate week following 9/11 and almost exactly a year later in 1992 you met to focus on the effectiveness of programs designed to end veteran homelessness. Moreover, here you are again today, May 6th, 2003 to legislatively continue the examination on the status of homeless-assistance programs conducted and coordinated by the Department of Veterans Affairs. Your legislative efforts and commitment during a tumultuous period has truly earned the respect and admiration of this professional enlisted military association.

Tragically, the national stage is already set for you to meet again in 2004 to continue oversight review of programs and processes to **end chronic homelessness amongst veterans**, as the Administration has stated, **in a decade**. NCOA believes that once this Nation has committed its resources to end chronic veteran homelessness it will happen! That commitment of resources has not yet been made. The Association believes that ending chronic homelessness can happen and within a forecasted decade. The question NCOA poses at the beginning of this Statement for the Record is:

When does the Decade Begin?

The issue is money –

**Funding adequately and directly those vital programs that have been authorized to
End Chronic Veteran Homelessness.**

Programs and Initiatives

Interagency Council on Homelessness

NCOA is enthusiastic that the Interagency Council has energized itself over the past two years after a dormant period of inactivity and is now promoting efforts from the federal level to the community level to foster development of collaborative efforts that integrate the efforts of all Federal Departments. Fiscal grant program resources made available by the Interagency Council and the announced NOFA has move the Council to a new evolutionary plateau to foster the necessary partnership in national strategy to end homelessness from the policy makers to the program implementers.

VA Secretarial Advisory Committee on Homelessness

NCOA recognizes that the Secretary of Veterans Affairs quickly organized an Advisory Committee on the issue of homelessness. The Committee has met and traveled to visit both VA and community-provider programs and will release to the Secretary its first report on best practice programs and recommendations to further develop activities to end chronic homelessness among veterans.

Prerequisite Funding Requirement

NCOA believes that the Secretary of Veterans Affairs has the integrity, drive and determination to aggressively implement those programs authorized for America's veterans subject to the tough decisions to live within the fiscal constraint of the Department's budget authority. There is no doubt in this Association's perspective that the DVA budget, despite continual increases in annual fiscal budget authority, remains inadequately funded for its primary mission to provide health care, benefits, and memorial affairs. This Association has year after year addressed the deficiencies in the DVA Budget in testimony to the Committee on Veterans Affairs.

- DVA, like all Federal Agencies, is limited by the Administration to a level of budget authority for its mission.
- The nationwide program strategy to end veteran homelessness under the current budget authority competes with all programs of the Department. There simply is not enough money to fund program requirements.
- The Association's annual legislative presentation proposed DVA receive a separate line item budget authority to implement the national programs envisioned in P.L. 107-95.

It is also apparent that while DVA and other Federal agencies are inadequately funded to provide the national strategies to end veteran homelessness that the varied departments have not fully utilized the limited fiscal resources that have been approved. In that regard, NCOA requests that the Subcommittee on Health determine why programs have not been implemented to their funded levels or are not included in budget requests:

Department of Veterans Affairs

Mental Health Care

Substance abuse, alcohol, chemical dependency, posttraumatic stress disorder, and the myriad of social behavioral problems are prevalent factors in individual homelessness. There are insufficient mental health professionals assigned to the veteran's health administration to provide for homeless mental health needs. There are unmet mental health expertises needed in primary care clinics, inpatient treatment facilities, and providing direct support of veterans in tandem with other health care practitioners at community-based homeless residential, continuum of care facilities for both housing and employment readiness training activities. NCOA strongly opposes the prevailing notion at VA that homeless veteran substance abuse and mental health needs can be effectively treated through the outpatient program. This Association is strongly convinced that VHA is not achieving its potential in the delivery of effective health care by not fully using mental health care practitioners as an integral part of every primary care team. Current health care research evidences that a mental health issue is the significant undiagnosed part of the presenting

problem of all patients. Mental health intervention could, as documented in research, save significant fiscal resources in laboratory testing, treatment regimens, pharmaceuticals, and unnecessary follow up medical appointments. The issue for VA like all nationwide health care programs is the culture change in health care to adequately staff mental health professionals as part of the healing team. Significant up front expenditures for staffing requirements are required to realize the long-term reductions in cost traditionally associated with health care. Effective medicine today requires the use of the healing skills of both physician and mental health care professional.

- At issue for the Subcommittee is the question of adequacy in providing for the mental health care needs of homeless veterans at both VHA and related community-provider programs.
- Recommendation that the Subcommittee for Health direct research to determine the best practices in the mental health intervention for homeless veterans.

VA Educational Health Care Initiative

VA has published a series of publications available on the Internet that details medical intervention processes in the primary health care emphasis programs designed for America's veterans. This professional resource provides ten independent learning modules about important and unique health issues of veterans and subsequent health care needs. The Health Care Initiative is available to **all** health care professionals, workers, patients, and anyone interested the varied health issues related to: Agent Orange, Cold Injury, Post Traumatic Stress, Ex-Prisoner of War, Visual Impairment, and Hearing Impairment.

. Not included in the current Health Care Initiative is a resource dealing with the medical, mental health or physical aspects and needs of homeless veterans. NCOA communicated that such a resource would well serve both the VA and the Nation's homeless community-providers.

- Development of a Homeless topic in the Veterans Health Care Initiative could well serve both VA the community providers at low cost.

Transitional Housing

The DVA estimates the availability of 6,615 transitional housing beds through the Homeless Providers Grant and Per Diem Program at the conclusion of FY03 that was funded at \$75 Million and continues straight lined through FY05. The FY2002 authorization utilized slightly more than 75 percent of the available \$60 Million budget authority.

- VA should be accountable to obligate the Homeless Grant and Per Diem Program budget authority to the level authorized.
- Program Adjustment to the new Per Diem Rate in FY2003 will minimize the annual program growth by absorbing an estimated \$15 Million of the FY 2003 budget authority. The straight lined FY2003-05 is inadequate sustain the necessary growth in this program.

- The estimate of over 250,000 homeless veterans on the streets of America warrants utilization of those funds that could provide shelter to begin their transition to a better life style.

Smoke and Mirrors: Another apparent fiscal transitional housing gain that is really a tragic loss for community providers was the termination of separately funded contracts under the Grant and Per Diem Program that allowed a per diem payment only in the amount of \$39.00 per day to provide for those veterans whose health was a major issue and who would in all probability never be employability. The Budget Authority of Per Diem (\$15 Million) was shifted into the Grant and Per Diem Program given the illusion of substantial growth.

- There is valid need of an increased per diem rate specifically to provide for the medical care and health needs, physical and mental, for veterans that will require long rehabilitative care and never return to either an independent life style or employability.

Capital Asset Realignment Enhanced Services (CARES)

NCOA corresponded with the DVA CARES program Manager early last year and noted that community-provider veteran programs (homeless or HVRP) should have priority access to enhanced use agreements that may become surplus on retained VA property. A number of Community-Providers of homeless veteran programs currently receive grants from the DVA for the management of their programs in space that is determined to be excess by DVA. These providers establish successful programs and build out their staffs with additional personnel resources to meet expanding program requirements.

At issue is the fact that annually when new leases are negotiated, DVA builds in cost increases that exceed the ability of a dedicated nonprofit entity to maintain their emerging program in the continuum of care of homeless veterans. Staff cuts limit homeless veteran program opportunities or the provider is forced to completely move from the grounds of the VA complex to a distant facility that becomes disruptive to the veterans access to services offered by the VAMC or health care complex.

- Community-based providers of needed veteran services are locked into long-term enhanced lease agreements that escalate by a factor of one-third the annual inflationary rate adjustment.

Department of Labor

HVRP - Opportunity for Employment

NCOA recognizes the absolute value of the Homeless Veteran Reintegration Program (HVRP) managed by the Department of Labor to be the most valued program available to move veterans along the continuum from homelessness through the transitional programs into the workplace, economic productivity, and independence. HVRP was funded in FY2002 and straight lined through FY2005 at \$50 Million. Regrettably, DOL has never requested the maximum available appropriation to implement nationwide HVRP programs.

Veterans have not had the opportunity to participate in HVRP because its administrator has intentionally dampened the program over the years.

- DOL should be held accountable to build the infrastructure and implement HVRP to the authorized program appropriation.

Department of Housing and Urban Development

HUD Sponsored Community Based Senior and Disabled Housing

Uniquely, thousands of our nation's senior and disabled veterans age eligible for HUD sponsored senior and disabled housing in their communities may be at risk of homelessness in their senior years because their VA Disability Compensation disqualifies them for this housing. In determination of Income Eligibility for these programs, HUD regulations require local senior and disabled housing officials to count VA Disability Compensation as income. There is a reluctance to grant waivers authorized on an individual basis by program manager. . There is even great reluctance on the part of senior veterans to request special consideration through a waiver to qualify for such housing. Although waivers may be granted on an individual basis, NCOA is convinced that tax-exempt VA disability compensation should be legislative in the qualification criteria for HUD senior assisted living programs.

- Establish in Law the exemption of VA tax-free disability compensation from being included in the qualification of senior veterans for HUS senior assisted living programs.

Secondly, the HUD Veteran Resource Center has published a HUDVET Directory that provides an easy to use state-by-state directory of special organizations and services available to veterans, active duty, Guard and Reserve members. The Directory has provided a ready to use referral guide and has been instrumental in referring veterans to activities anywhere in the United States and its Territories. An administrative decision was made not to publish the 2003 Directory and save approximately \$50,000.00 since the material is also available on the Internet. At issue are many activities and people that work with homeless veterans and others do not have access to the Internet and the HUDVET Directory provides ready reference and referral in their activities.

- Recommend publication and distribution of a printed version of the 2003 HUDVET Directory.

Homeless Prevention Programs

NCOA strongly supports the efforts of the Departments of Defense, Justice, Labor, and Labor to implement homeless veteran prevention programs NOW to provide educational and program awareness information for veterans who are separating from military service, being discharged from medical institutions, or even being released from penal institutions. The key to prevention is to begin working with the people before their discharge or release from their current status. It is essential that each veteran's needs and life style requirements including location, housing and support through groups and counselors be incorporated in the plan.

Public Law 105-368

Transitional Housing Pilot Program

Enacted Veterans Day 1998, the Department of Veterans Affairs is authorized to guarantee 15 loans to provide multifamily transitional housing projects for homeless veterans and other homeless people. To date VA has developed criteria and guidelines for the management of this program and are now working with five locations nationally for award of guaranty loans by the end of this fiscal year. The Secretary of Veterans Affairs reported to your Committee (March 2001) that considerable time and effort has been devoted by VA over the years to resolve funding levels associated with acquisition, to secure consulting and technical services to ensure the administrative criteria and process would result in the effective utilization of the \$100 Million authorized for this program.

Transitional housing bed spaces are critical to provide the controlled environment to ensure that formerly homeless veterans being discharged from inpatient VA care programs and Domiciliaries have a safe and controlled place to complete reintegration into the community and workforce. It is also essential that planning be completed to ensure the necessary veteran support program elements are available to work with those who would be accommodated in transitional housing opportunity through this guaranty grant program.

- Ensure that the first Loan Guaranty Projects be awarded before the end of FY2003.

Dental Care

P.L. 107-95 included a one-time authorization for dental restoration for homeless veterans. VA is now in the process of implementing a limited pilot program to provide for this need. The Association applauds VA for putting the pilot on the street. NCOA also encourages the continued development of a dental referral service for homeless veteran's dental schools and teaching facilities.

Technical Assistance

VA is authorized to contract out competitive grants not to exceed \$750,000 to provide technical assistance to community based groups applying for grants under the Grant and Per Diem Program. Community based providers need the assistance of experts to develop the competency to compete in this VA Grant Program.

- **Recommend VA make this funding available beginning in FY03 and continuing thereafter designating a sole source contract to the National Coalition for Homeless Veterans, the national advocate for homelessness, to provide technical assistance nationally to community based organizations.**

Conclusion

Mr. Chairman and Members of the Subcommittee: it has been a privilege to share this Statement for the Record in the name of the Non Commissioned Officers Association. I would conclude the statement with the observation that the Department of Veterans Affairs and other federal agencies are hard pressed to implement the strategic policies and programs of P.L. 107-95 because of the lack of fiscal appropriated resources. Many initiatives seem to be brought on line as token Pilot efforts to show movement in the homeless arena. It is obvious that the homeless veteran issue will take the collaborative effort of federal agencies, together with community partners, and adequate funding over a programming span of a decade. There is no doubt that the lack of fiscal resources limits the resolution of chronic veteran homelessness.

Again, thanks for the opportunity to share this perspective.



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BIOGRAPHY

Of

Richard C. Schneider
Director of State/Veterans Affairs

Mr. Schneider is the National Director of State/Veterans Affairs, Non Commissioned Officers Association of the United States of America. His responsibilities include executive management of all NCOA programs that support America's veterans. These include service transition, employment, benefit rights and adjudication processes. He directs 473 NCOA Veteran Service Officers located in the United States and overseas. Additionally, he provides legislative focus for 46 NCOA State Legislative Coordinators, which represent NCOA in State Legislative Affairs. Mr. Schneider concurrently serves as the Executive Director of the NCOA National Defense Foundation. In this capacity, he is responsible for the Association's Voter Registration Program including the operation of the National Voter Registration and Information Center in cooperation with the Department of Defense. He also serves as Executive Director of the NCOA National Defense Foundation, which benefits veterans of America's Uniformed Services, and other Foundation designated humanitarian outreaches.

Mr. Schneider was born in New Jersey. He was raised in the Garden State attending elementary and secondary schools in Lyndhurst. He has a Bachelor of Science from the University of Southern Colorado (1972) and a Master of Arts from the University of Northern Colorado (1974).

He serves on the following Councils and Committees:

Department of Veterans Affairs:

- Secretary's Advisory Committee on the Readjustment of Veterans
- Secretary's Advisory Committee on Homeless Veterans

Department of Labor:

- Secretary's Advisory Committee on Veterans' Employment and Training

Commonwealth of Virginia

- Governor's Advisory Committee on Veterans

National Veteran Service Organizations

- Chairman, Veterans Organization Homeless Council, Washington DC

He served in the United States Air Force from August 1957 to September 1990. Mr. Schneider retired in the grade of Chief Master Sergeant. He held significant assignments in management and personnel planning throughout his military career. His military decorations include the Legion of Merit, the Meritorious Service Medal with two Oak Leaf Clusters and the Air Force Commendation Medal with four Oak Leaf Clusters. His overseas assignments have included England, Scotland, Republic of Vietnam, and Germany.

He is currently the Secretary, Board of Directors, Pentagon Federal Credit Union, Alexandria, VA.

Mr. Schneider is married to the former Anne Ferguson of Prestwick, Ayrshire, Scotland. They have four children: three daughters, Kristin, Leslie, and Fiona; and a son, Richard.

DISCLOSURE OF FEDERAL GRANTS AND CONTRACTS

The Non Commissioned Officer Association of the USA (NCOA) does not currently receive, nor has the Association ever received, any federal money for grants or contracts. All of the Association's activities and services are accomplished completely free of any federal funding.